## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax (571)-273-2885

INSTRUCTIONS: This appropriate. All further indicated unless correct maintenance fee notifica	form should be used to correspondence including ed below or directed of	for tran ng the i nerwise	smitting the ISSU Patent, advance of in Block 1, by (a	JE FEE and PUBLIC rders and notification a) specifying a new c					ould be completed where correspondence address as rate "FEE ADDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)						Note: A certificate of mailing can only be used for domestic mailings of the Fec(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.				
21186	7590 05/14	/2008			11410			_		
SCHWEGMA P.O. BOX 2938 MINNEAPOLIS	A.	I her State addre trans	eby certify that the s Postal Service wessed to the Mail mitted to the USP	is Fee(s tith suff Stop 1 TO (57)	of Mailing or Transi ) Transmittal is being ficient postage for firs (SSUE FEE address () 273-2885, on the da	deposited with the United t class mail in an envelope above, or being facsimile ate indicated below.				
			Melissa M. Marsh		-21	(Depositor's name)				
			IVall HA			(Signature)				
						<u> </u>	18,	1008	(Date)	
APPLICATION NO.	TION NO. FILING DATE		FIRST NAMED INVE				ATTO	RNEY DOCKET NO.	CONFIRMATION NO.	
09/734,045 12/12/2000 Richard B. Gorelick 2043.063US1 3515										
TITLE OF INVENTION: AUTOMATICALLY INSERTING RELEVANT HYPERLINKS INTO A WEBPAGE										
APPLN. TYPE	SMALL ENTITY	SMALL ENTITY IS:		PUBLICATION FEE	OUE	PREV. PAID ISSUE FE		TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	NO		\$300		\$0		\$1740	08/14/2008	
EXAMINER			ART UNIT	CLASS-SUBCLASS						
HILLERY, NATHAN 2176				707-500100	/07-500100					
<ol> <li>Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).</li> <li>Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.</li> <li>"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.</li> </ol>				2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.  1 Schwegman, Lundberg, Woessner P.A.						
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)										
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.										
(A) NAME OF ASSICE	(B) RESIDENCE: (CITY and STATE OR COUNTRY) San Jose, California									
Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🖾 Corporation or other private group entity 🖵 Government										
4a. The following fee(s) are submitted:   Issue Fee  Publication Fee (No small entity discount permitted)  Advance Order - # of Copies				b. Payment of Fec(s): (Please first reapply any previously paid issue fee shown above)  A check is enclosed.  Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 19-0743 (enclose an extra copy of this form).						
5. Change in Entity Status (from status indicated above)  \[ \begin{align*} \text{a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.} \end{align*} \]  b. Applicant is no longe										
NOTE: The Issue Fee an interest as shown by the	d Publication Fee (if req records of the United Sta	uired) v ites Pat	vill not be accepted ent and Trademark	d from anyone other to Office.	han th	ne applicant; a regi	stered a	ttorney or agent; or th	e assignee or other party in	
Authorized Signature			Date Ů	NY	- 18,700	8				
Typed or printed nam	Registration No									
This collection of inform an application. Confiden submitting the complete this form and/or suggesti Box 1450, Alexandria, V	nation is required by 37 C tiality is governed by 35 d application form to the ions for reducing this bu irginia 22313-1450. DC	CFR 1.3 U.S.C. USPT den, sl NOT	11. The information 122 and 37 CFR O. Time will vary tould be sent to the SEND FEES OR (	on is required to obtain 1.14. This collection is depending upon the chief Information COMPLETED FORM	n or re is esti indivi Office IS TO	etain a benefit by t mated to take 12 r idual case. Any co r, U.S. Patent and THIS ADDRESS	he publi minutes mments Tradem S. SENI	ic which is to file (and to complete, includin s on the amount of tin ark Office, U.S. Depa of TO: Commissioner i	by the USPTO to process) g gathering, preparing, and ne you require to complete urtment of Commerce, P.O. for Patents, P.O. Box 1450,	

Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.